

EXHIBIT A

CERTIFICATE OF ORIGIN FOR A VEHICLE**STOUGHTON®**

Stoughton Trailers, LLC

DATE
8/7/2019

INVOICE NO.

VEHICLE IDENTIFICATION NO.
1DW1A532XLBA43763YEAR
2020MAKE
StoughtonBODY TYPE
Aluminum smoothside vanSHIPPING WEIGHT
12,290

H.P. (S.A.E.)

G.V.W.R.
70,000

NO. CYLS.

SERIES OR MODEL
AVW-535T-S-C

I, the undersigned authorized representative of the company, firm or corporation named below, hereby certify that the new vehicle described above is the property of the said company, firm or corporation and is transferred on the above date and under the Invoice Number indicated to the following distributor or dealer.

NAME OF DISTRIBUTOR, DEALER, ETC.

AMAZON LOGISTICS

410 TERRY AVENUE NORTH

SEATTLE WA 98109-5210

UNITED STATES

It is further certified that this was the first transfer of such new vehicle in ordinary trade and commerce.

STOUGHTON TRAILERS, LLC

Brenda Krause

BY:

(SIGNATURE OF AUTHORIZED REPRESENTATIVE)

(AGENT)

STO-315534

416 SOUTH ACADEMY STREET
STOUGHTON, WI 53589

CITY-STATE

| | | |
|---|--|--|
| | <p>Each undersigned seller certifies to the best of his knowledge, information and belief under penalty of law that the vehicle is new and has not been registered in this or any state at the time of delivery and the vehicle is not subject to any security interests other than those disclosed herein and warrant title to the vehicle.</p> <p>FOR VALUE RECEIVED I TRANSFER THE VEHICLE DESCRIBED ON THE FACE OF THIS CERTIFICATE TO:</p> | |
| DISTRIBUTION-DEALER ASSIGNMENT NUMBER 1 | <p>NAME OF PURCHASER(S) _____</p> <p>ADDRESS _____</p> <p>I certify to the best of my knowledge that the odometer reading is _____ No Tenths</p> <p>DEALER _____ BY: _____</p> <p>NAME OF DEALERSHIP _____ DEALER'S LICENSE NUMBER _____ Being duly sworn upon oath says that the statements set forth are true and correct. Subscribed and sworn to me before this _____ day of _____ Year _____</p> <p>State of _____ Notary Public</p> <p>County of _____</p> <p>USE NOTARIZATION ONLY IF REQUIRED IN TITLING JURISDICTION</p> | |
| DISTRIBUTION-DEALER ASSIGNMENT NUMBER 2 | <p>NAME OF PURCHASER(S) _____</p> <p>ADDRESS _____</p> <p>I certify to the best of my knowledge that the odometer reading is _____ No Tenths</p> <p>DEALER _____ BY: _____</p> <p>NAME OF DEALERSHIP _____ DEALER'S LICENSE NUMBER _____ Being duly sworn upon oath says that the statements set forth are true and correct. Subscribed and sworn to me before this _____ day of _____ Year _____</p> <p>State of _____ Notary Public</p> <p>County of _____</p> <p>USE NOTARIZATION ONLY IF REQUIRED IN TITLING JURISDICTION</p> | |
| DISTRIBUTION-DEALER ASSIGNMENT NUMBER 3 | <p>NAME OF PURCHASER(S) _____</p> <p>ADDRESS _____</p> <p>I certify to the best of my knowledge that the odometer reading is _____ No Tenths</p> <p>DEALER _____ BY: _____</p> <p>NAME OF DEALERSHIP _____ DEALER'S LICENSE NUMBER _____ Being duly sworn upon oath says that the statements set forth are true and correct. Subscribed and sworn to me before this _____ day of _____ Year _____</p> <p>State of _____ Notary Public</p> <p>County of _____</p> <p>USE NOTARIZATION ONLY IF REQUIRED IN TITLING JURISDICTION</p> | |
| DISTRIBUTION-DEALER ASSIGNMENT NUMBER 4 | <p>NAME OF PURCHASER(S) _____</p> <p>ADDRESS _____</p> <p>I certify to the best of my knowledge that the odometer reading is _____ No Tenths</p> <p>DEALER _____ BY: _____</p> <p>NAME OF DEALERSHIP _____ DEALER'S LICENSE NUMBER _____ Being duly sworn upon oath says that the statements set forth are true and correct. Subscribed and sworn to me before this _____ day of _____ Year _____</p> <p>State of _____ Notary Public</p> <p>County of _____</p> <p>USE NOTARIZATION ONLY IF REQUIRED IN TITLING JURISDICTION</p> | |
| ODOMETER DISCLOSURE FOR RETAIL SALE | <p>Federal Law requires you to state the odometer mileage in connection with the transfer of ownership. Failure to complete or providing a false statement may result in fines and/or imprisonment.</p> <p>I certify to the best of my knowledge that the odometer reading is the actual mileage of the vehicle unless one of the following statements is checked: Odometer Reading _____ No Tenths. <input type="checkbox"/> The mileage stated is in excess of its mechanical limits. <input type="checkbox"/> The odometer reading is not the actual mileage.</p> <p>WARNING ODOMETER DISCREPANCY</p> <p>Signature(s) of Seller(s) _____ Date of Statement _____ Date of Sale _____</p> <p>Printed Name(s) of Seller(s) _____ Dealer's No. _____ Being duly sworn upon oath says that the statements set forth are true and correct. Subscribed and sworn to me before this _____ day of _____ Year _____</p> <p>Signature(s) of Purchaser(s) _____ Notary Public</p> <p>Printed Name(s) of Purchaser(s) _____ State of _____</p> <p>Company Name (If Applicable) _____ County of _____</p> <p>Address of Purchaser(s) _____</p> <p>USE NOTARIZATION ONLY IF REQUIRED IN TITLING JURISDICTION</p> | |
| LIENHOLDER | <p>1st lien in favor of <u>BANC OF AMERICA LEASING & CAPITAL LLC</u></p> <p>whose address is <u>2059 NORTHLAKE PARKWAY, TUCKER, GA 30084</u></p> <p>2nd lien in favor of _____</p> <p>whose address is _____</p> | |



IDAHO

Motor Carrier Vehicle Registration

Weight over 80,000 pounds may require permit(s).

| | | | | | |
|--|-----------------------------|---|--|---|---------------------------------|
| Plate Number TM9527 | | Effective/Enforcement Date 10/08/2019 | | Expiration Date PERMANENT | |
| Account Number 624788 | | Fleet Number 001 | | Supp Number 030 | Registration Type PTF |
| Base Jur ID ID | | USDOT Number 002881058 | | | |
| Registrant Legal Name AMAZON LOGISTICS INC | | | Registrant Doing Business As Name | | |
| Vehicle Year 2020 | Vehicle Make STOU | Vehicle Type FT | Title Number CN | Titled Owner AMAZON LOGISTICS INC | |
| Vehicle Identification No. 1DW1A532XLBA43763 | | | Unit Number V511632 | | |

MAY BE FOLDED DO NOT DETACH

Signature: _____ (Applicant must sign to be valid)

Motor vehicle registrations for permanent trailers will not be issued a decal.



MAY BE FOLDED DO NOT DETACH

Requirements for Canceling Registration

This form of the license plate and deletion request must be submitted if the vehicle is sold. Inquiries regarding this registration should be directed to Motor Carrier Services.

Mailing Address: Idaho Transportation Department
Motor Carrier Services
PO Box 7129
Boise, ID 83707-1129

Physical Address: 3311 West State Street
Boise, ID 83703

Phone: 208-334-8611 **Fax:** 208-334-2006 **E-mail:** cvs@itd.idaho.gov

Registrant: AMAZON LOGISTICS INC

User Id: CLAMMING

8033 FLINT ST # 200
LENEZA KS 66214



If you have not yet completed a Release of Liability (ROL) Statement, complete the one below and return this entire document along with the \$3.50*fee to your local county assessor's auto-licensing office for processing. Alternatively, you may send in the completed form along with a \$3.50* check or money order to the Ada County Processing Center, P.O. Box 140019, Garden City, ID 83714-0019 (This form is also available online at <http://itd.idaho.gov/dmv/VehicleServices/vs.htm>). *This fee is subject to legislative changes. Before sending in this ROL, please visit the ITD website at - <http://www.itd.idaho.gov/dmv/> to find out if the ROL fee has changed.

NOTICE OF RELEASE OF LIABILITY

THIS FORM MUST BE COMPLETELY FILLED OUT TO BE VALID
(Please Print Clearly)

\$3.50 Fee

\$3.50 Fee

| | |
|-------------------------------|---------------------|
| New Owner Name | Odometer Reading |
| New Owner Address | Selling Price |
| City, State, Zip | Date of Delivery |
| Vehicle Identification Number | Vehicle Description |

Any former owner who signs and returns a completed Release of Liability Statement to the Idaho Transportation Department, with the proper fee, will not be liable for the operation of this vehicle after it has been sold or transferred. (Section 49-2417, Idaho Code)

Seller's Signature

Date

(PERF)

(PERF)

THIS REGISTRATION AND YOUR CERTIFICATION OF LIABILITY INSURANCE MUST BE KEPT IN YOUR VEHICLE AT ALL TIMES

LIABILITY INSURANCE REQUIREMENTS

If you cease to maintain the insurance required in Section 49-1229, Idaho Code, you must immediately surrender your registration document and license plates as required in Section 49-1230, Idaho Code.

MOTOR CARRIER SAFETY AND INSURANCE CERTIFICATION

If I am registering as a motor carrier, by signing the front of this document, I certify knowledge of applicable Federal Motor Carrier safety regulations, hazardous materials regulations, and applicable State laws and regulations, and declare all operations will be conducted in compliance with such requirements. I also certify under penalty of law that the described vehicle is and will be continuously insured as prescribed under the applicable state and federal rules listed below:

STATE:

IDAPA 39.02.80

Motor Carrier

Financial Responsibility

FEDERAL:

49 CFR, Part 387

Minimum Levels of

Financial Responsibility
for Motor Carriers.

YOUR LIFE IS IN YOUR HANDS



CERTIFICATE OF ORIGIN FOR A VEHICLE**STOUGHTON®**

Stoughton Trailers, LLC

DATE
7/16/2019

INVOICE NO.

VEHICLE IDENTIFICATION NO.
1DW1A5329LSA43138YEAR
2020MAKE
StoughtonBODY TYPE
Aluminum smoothside vanSHIPPING WEIGHT
12,290

H.P. (S.A.E.)

G.V.W.R.

NO. CYLS.

SERIES OR MODEL

70,000

AVW-535T-S-C

Unit Number: V511413

I, the undersigned authorized representative of the company, firm or corporation named below, hereby certify that the new vehicle described above is the property of the said company, firm or corporation and is transferred on the above date and under the Invoice Number indicated to the following distributor or dealer.

NAME OF DISTRIBUTOR, DEALER, ETC.

AMAZON LOGISTICS
410 TERRY AVENUE NORTH
SEATTLE WA 98109-5210
UNITED STATES

It is further certified that this was the first transfer of such new vehicle in ordinary trade and commerce.

STOUGHTON TRAILERS, LLC

BY:

Brenda Krause

(SIGNATURE OF AUTHORIZED REPRESENTATIVE)

(AGENT)

416 SOUTH ACADEMY STREET
STOUGHTON, WI 53589

CITY-STATE

STO-314447

| | | |
|---|--|--|
| | <p>Each undersigned seller certifies to the best of his knowledge, information and belief under penalty of law that the vehicle is new and has not been registered in this or any state at the time of delivery and the vehicle is not subject to any security interests other than those disclosed herein and warrant title to the vehicle.</p> <p>FOR VALUE RECEIVED I TRANSFER THE VEHICLE DESCRIBED ON THE FACE OF THIS CERTIFICATE TO:</p> | |
| DISTRIBUTION-DEALER ASSIGNMENT NUMBER 1 | <p>NAME OF PURCHASER(S) _____</p> <p>ADDRESS _____</p> <p>I certify to the best of my knowledge that the odometer reading is _____ No Tenths</p> <p>DEALER _____ BY: _____</p> <p>NAME OF DEALERSHIP DEALER'S LICENSE NUMBER Being duly sworn upon oath says that the statements set forth are true and correct. Subscribed and sworn to me before this _____ day of _____ Year _____</p> <p>State of _____ Notary Public</p> <p>County of _____</p> <p>USE NOTARIZATION ONLY IF REQUIRED IN TITLING JURISDICTION</p> | |
| DISTRIBUTION-DEALER ASSIGNMENT NUMBER 2 | <p>NAME OF PURCHASER(S) _____</p> <p>ADDRESS _____</p> <p>I certify to the best of my knowledge that the odometer reading is _____ No Tenths</p> <p>DEALER _____ BY: _____</p> <p>NAME OF DEALERSHIP DEALER'S LICENSE NUMBER Being duly sworn upon oath says that the statements set forth are true and correct. Subscribed and sworn to me before this _____ day of _____ Year _____</p> <p>State of _____ Notary Public</p> <p>County of _____</p> <p>USE NOTARIZATION ONLY IF REQUIRED IN TITLING JURISDICTION</p> | |
| DISTRIBUTION-DEALER ASSIGNMENT NUMBER 3 | <p>NAME OF PURCHASER(S) _____</p> <p>ADDRESS _____</p> <p>I certify to the best of my knowledge that the odometer reading is _____ No Tenths</p> <p>DEALER _____ BY: _____</p> <p>NAME OF DEALERSHIP DEALER'S LICENSE NUMBER Being duly sworn upon oath says that the statements set forth are true and correct. Subscribed and sworn to me before this _____ day of _____ Year _____</p> <p>State of _____ Notary Public</p> <p>County of _____</p> <p>USE NOTARIZATION ONLY IF REQUIRED IN TITLING JURISDICTION</p> | |
| DISTRIBUTION-DEALER ASSIGNMENT NUMBER 4 | <p>NAME OF PURCHASER(S) _____</p> <p>ADDRESS _____</p> <p>I certify to the best of my knowledge that the odometer reading is _____ No Tenths</p> <p>DEALER _____ BY: _____</p> <p>NAME OF DEALERSHIP DEALER'S LICENSE NUMBER Being duly sworn upon oath says that the statements set forth are true and correct. Subscribed and sworn to me before this _____ day of _____ Year _____</p> <p>State of _____ Notary Public</p> <p>County of _____</p> <p>USE NOTARIZATION ONLY IF REQUIRED IN TITLING JURISDICTION</p> | |
| ODOMETER DISCLOSURE FOR RETAIL SALE | <p>Federal Law requires you to state the odometer mileage in connection with the transfer of ownership. Failure to complete or providing a false statement may result in fines and/or imprisonment.</p> <p>I certify to the best of my knowledge that the odometer reading is the actual mileage of the vehicle unless one of the following statements is checked. Odometer Reading _____ No Tenths. <input type="checkbox"/> The mileage stated is in excess of its mechanical limits. <input type="checkbox"/> The odometer reading is not the actual mileage.</p> <p>WARNING ODOMETER DISCREPANCY</p> <p>Signature(s) of Seller(s) _____ Date of Statement _____ Date of Sale _____</p> <p>Printed Name(s) of Seller(s) _____ Dealer's No. _____ Being duly sworn upon oath says that the statements set forth are true and correct. Subscribed and sworn to me before this _____ day of _____ Year _____</p> <p>Signature(s) of Purchaser(s) _____ Notary Public</p> <p>Printed Name(s) of Purchaser(s) _____ State of _____</p> <p>Company Name (If Applicable) _____ County of _____</p> <p>Address of Purchaser(s) _____</p> <p>USE NOTARIZATION ONLY IF REQUIRED IN TITLING JURISDICTION</p> | |
| LIENHOLDER | <p>1st lien in favor of <u>BANC OF AMERICA LEASING & CAPITAL LLC</u></p> <p>whose address is <u>2059 NORTHLAKE PARKWAY, TUCKER, GA 30084</u></p> <p>2nd lien in favor of _____</p> <p>whose address is _____</p> | |



IDAHO

Motor Carrier Vehicle Registration

Weight over 80,000 pounds may require permit(s).

| | | | | | | | |
|--|-----------------------------|--|--|--|--|---|----------------------------------|
| Plate Number TM6814 | | Effective/Enforcement Date 08/09/2019 | | Expiration Date PERMANENT | | | |
| Account Number 624788 | | Fleet Number 001 | | Supp Number 017 | | Registration Type PTF | |
| Base Jur KS | | | | | | | |
| Registrant Legal Name AMAZON LOGISTICS INC | | | | Registrant Doing Business As Name | | | USDOT Number 002881058 |
| | | Vehicle Type FT | | Title Number CN | | Titled Owner AMAZON LOGISTICS INC | |
| Vehicle Year 2020 | Vehicle Make STOU | Vehicle Identification No. 1DW1A5329LSA43138 | | | | Unit Number V511413 | |

MAY BE FOLDED DO NOT DETACH

Signature: _____ (Applicant must sign to be valid)

Motor vehicle registrations for permanent
trailers will not be issued a decal.



MAY BE FOLDED DO NOT DETACH

Requirements for Canceling Registration

This form of the license plate and deletion request must be submitted if the vehicle is sold. Inquiries regarding this registration should be directed to Motor Carrier Services.

Mailing Address: Idaho Transportation Department
Motor Carrier Services
PO Box 7129
Boise, ID 83707-1129

Physical Address: 3311 West State Street
Boise, ID 83703

Phone: 208-334-8611 **Fax:** 208-334-2006 **E-mail:** cvs@itd.idaho.gov

Registrant: AMAZON LOGISTICS INC

User Id: CLAMING

8033 FLINT ST # 200
LENEZA KS 66214



If you have not yet completed a Release of Liability (ROL) Statement, complete the one below and return this entire document along with the \$3.50*fee to your local county assessor's auto-licensing office for processing. Alternatively, you may send in the completed form along with a \$3.50* check or money order to the Ada County Processing Center, P.O. Box 140019, Garden City, ID 83714-0019 (This form is also available online at <http://itd.idaho.gov/dmv/VehicleServices/vs.htm>). *This fee is subject to legislative changes. Before sending in this ROL, please visit the ITD website at - <http://www.itd.idaho.gov/dmv/> to find out if the ROL fee has changed.

NOTICE OF RELEASE OF LIABILITY

THIS FORM MUST BE COMPLETELY FILLED OUT TO BE VALID

(Please Print Clearly)

\$3.50 Fee

\$3.50 Fee

| | |
|-------------------------------|---------------------|
| New Owner Name | Odometer Reading |
| New Owner Address | Selling Price |
| City, State, Zip | Date of Delivery |
| Vehicle Identification Number | Vehicle Description |

Any former owner who signs and returns a completed Release of Liability Statement to the Idaho Transportation Department, with the proper fee, will not be liable for the operation of this vehicle after it has been sold or transferred. (Section 49-2417, Idaho Code)

Seller's Signature

Date

(PERF)

THIS REGISTRATION AND YOUR CERTIFICATION OF LIABILITY INSURANCE MUST BE KEPT IN YOUR VEHICLE AT ALL TIMES

LIABILITY INSURANCE REQUIREMENTS

If you cease to maintain the insurance required in Section 49-1229, Idaho Code, you must immediately surrender your registration document and license plates as required in Section 49-1230, Idaho Code.

MOTOR CARRIER SAFETY AND INSURANCE CERTIFICATION

If I am registering as a motor carrier, by signing the front of this document, I certify knowledge of applicable Federal Motor Carrier safety regulations, hazardous materials regulations, and applicable State laws and regulations, and declare all operations will be conducted in compliance with such requirements. I also certify under penalty of law that the described vehicle is and will be continuously insured as prescribed under the applicable state and federal rules listed below:

STATE:

IDAPA 39.02.80

Motor Carrier

Financial Responsibility

FEDERAL:

49 CFR, Part 387

Minimum Levels of

Financial Responsibility
for Motor Carriers.

(PERF)

YOUR LIFE IS IN YOUR HANDS



Buckle Up!